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    4660276 "ACID"
    1648080 "ACIDS"
    5176668 "ACID"
        ("ACID" OR "ACIDS")
    10556 "ACETYLSALICYLIC ACID"
        ("ACETYLSALICYLIC" (W) "ACID")
    23344 ASPIRIN
        57 ASPIRINS
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23357 ASPIRIN  
 (ASPIRIN OR ASPIRINS)  
 L1 31422 "ACETYLSALICYLIC ACID" OR ASPIRIN

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 41 TOPICALS  
 51467 TOPICAL  
 (TOPICAL OR TOPICALS)  
 12795 OINTMENT  
 16676 OINTMENTS  
 22066 OINTMENT  
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 287281 EXTERNAL  
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 L2 887 L1 AND (TOPICAL OR OINTMENT OR EXTERNAL)

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 1553 PAINS  
 62270 PAIN  
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=> S L3 AND PY<=2004  
 25112874 PY<=2004  
 L4 74 L3 AND PY<=2004

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 L5 62 L3 AND PY<=2003

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 468374 0.05%  
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 1056124 80%  
 (80)  
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L6 ANSWER 1 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN  
 ACCESSION NUMBER: 2005:679034 CAPLUS  
 TITLE: Extracts of flowers of carthamus tinctorius and  
 analgesis agents containing them  
 INVENTOR(S): Huh, Moon Young; Kim, Hyun Pyo  
 PATENT ASSIGNEE(S): Samchully Pharm. Co., Ltd., S. Korea  
 SOURCE: Repub. Korea, No pp. given  
 CODEN: KRXXFC  
 DOCUMENT TYPE: Patent  
 LANGUAGE: Korean  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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KR 202319	B1	19990615	KR 1998-59882	19981229 <--

KR 193906 B1 19990615 KR 1996-39952 19960914 <--  
PRIORITY APPLN. INFO.: KR 1996-39952 A 19960914

AB PURPOSE: An extract containing Kaempferol-3-O-rutinoside as an active component extracted from flower of *Carthamus tinctorius* and an anodyne containing the same are provided, which have a pain-killing effect about two times more than that of aspirin. CONSTITUTION: A flower of *Carthamus tinctorius* extract contains 0.1 to 0.5% by weight of Kaempferol-3-O-rutinoside, 0.01 to 0.1% by weight of astragalin, and 0.05 to 0.3% of rutin and a pharmaceutically acceptable carrier. The extracts have been formulated into a tablet, a capsule, a soft capsule, a liquid, an ointment or an injection.

L6 ANSWER 2 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN

ACCESSION NUMBER: 2003:466643 CAPLUS

DOCUMENT NUMBER: 139:26666

TITLE: Composition for topical application to skin

INVENTOR(S): McClung, Jackie H.

PATENT ASSIGNEE(S): USA

SOURCE: U.S., 14 pp., Cont. of U. S. Ser. No. 82,566, abandoned

DOCUMENT TYPE: Patent CODEN: USXXAM

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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US 6579543 B1 20030617 US 2002-153057 20020521 <--

PRIORITY APPLN. INFO.: US 2002-82566 B1 20020222

AB Disclosed is a composition for topical application to an animal's skin for relief from a variety of symptoms caused by medical conditions or phys. injuries. The composition includes at least one compound having analgesic

activity, at least one compound having anti-inflammatory activity, at least one compound having antioxidant activity, at least one compound having anti-neuritic activity, at least one compound having blood circulation promotion activity, and at least one compound having antidepressant activity. A method for relieving pain by topical application of the composition is also provided. For example, a topical composition contained whole leaf aloe vera concentrate 60, purified water 23.05, MSM 5.0, Emu oil 5.0, Arnica extract 4.0, SD-Alc.-40 1.0, sorbitol 0.70, menthol 0.10, glucosamine HCl 0.1, sodium chondroitin sulfate 0.1, Capsicum Oleoresin 0.1, nettle extract 0.1, Coriander oil 0.1, Kava Kava extract 0.1, exts. of Blue Bottle, Roman chamomile, marigold and lime tree 0.1, willow bark extract 0.1, witch hazel extract 0.1, Carbomer-940 0.1, triethanolamine 0.1, and ascorbyl palmitate 0.05 %.

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 3 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN

ACCESSION NUMBER: 2002:516594 CAPLUS

DOCUMENT NUMBER: 137:83650

TITLE: Salicylic acid derivatives as topical analgesics

INVENTOR(S): Van Engelen, H. Wayne; Van Engelen, Patricia A.

PATENT ASSIGNEE(S): USA

SOURCE: U.S., 5 pp.

DOCUMENT TYPE: Patent CODEN: USXXAM

LANGUAGE: English  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 6416772	B1	20020709	US 2001-759970	20010112 <--
US 20020094343	A1	20020718		
WO 2002072037	A1	20020919	WO 2002-US731	20020110 <--
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				
AU 2002235345	A1	20020924	AU 2002-235345	20020110 <--
PRIORITY APPLN. INFO.:			US 2001-759970	A 20010112
			WO 2002-US731	W 20020110
AB	A liquid composition permeating skin to relieve pain comprises alc. 57-91%, glycerin 1-12%, an analgesic agent, i.e., a salicylic acid derivative 2-28%, methylsulfonylmethane 0.02-5%, and emu oil 0.01-3%. The composition further comprises, as an addnl. feature, aloe vera 0.05-4%. The composition features transdermal pain relief such that a patient can apply the analgesic agent directly to an area of pain without such side effects as stomach irritation which is normally associated with aspirin. The composition may be sprayed or rolled directly onto the painful area. Because of the unique formula, the composition is safe to vital internal organs, requires no mixing before use, and is shelf stable for marketing purposes. For example, a test solution was applied to the skin of a woman with a headache. Minutes later the pain from the headache had subsided. She was able to then continue on with her daily routine free of headache pain.			
REFERENCE COUNT:	3	THERE ARE 3 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT		

L6 ANSWER 4 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN  
ACCESSION NUMBER: 2002:409811 CAPLUS  
DOCUMENT NUMBER: 137:15485  
TITLE: Topically applied aspirin decreases histamine-induced wheal and flare reactions in normal and SLS-inflamed skin, but does not decrease itch. A randomized, double-blind and placebo-controlled human study  
AUTHOR(S): Thomsen, J. S.; Benfeldt, E.; Jensen, S. B.; Serup, J.; Menne, T.  
CORPORATE SOURCE: Department of Dermatology, Gentofte Hospital, University of Copenhagen, Hellerup, DK-2900, Den.  
SOURCE: Acta Dermato-Venereologica (2002), 82(1), 30-35  
PUBLISHER: CODEN: ADVEA4; ISSN: 0001-5555  
DOCUMENT TYPE: Taylor & Francis  
LANGUAGE: Journal  
AB Topically applied aspirin has recently been reported to decrease histamine-induced itch in human volunteers. Our aim is to confirm this and to study the antipruritic ability of topical aspirin in inflamed skin. In 24 non-atopic volunteers, an inflammatory skin reaction was induced in forearm skin at 5 different sites by sodium lauryl

sulfate contained in Finn Chambers. Aspirin 10%, aspirin 1%, mepyramine 5% and vehicle were applied to the inflamed and corresponding non-inflamed areas 20 min before itch induction with intradermal histamine injection. Itch and pain were scored on a visual analog scale at regular intervals. Wheal and flare areas were measured. No difference in itch intensities was found after application of aspirin, mepyramine and vehicle, but more itch was induced in aspirin and mepyramine pretreated sites in inflamed skin compared to normal skin ( $p < 0.05$ ). In normal skin, flare areas were smaller after pretreatment with aspirin 10% ( $p < 0.05$ ) and mepyramine ( $p < 0.001$ ), as were wheal areas after mepyramine ( $p < 0.01$ ), compared to vehicle pretreatments. In inflamed skin, flare areas were smaller after pretreatment with aspirin 10% ( $p < 0.01$ ) and mepyramine ( $p < 0.001$ ), as were wheal areas after aspirin 10% ( $p < 0.01$ ), aspirin 1% ( $p < 0.05$ ) and mepyramine ( $p < 0.001$ ). We conclude that despite a significant skin penetration as measured by the influence on wheal and flare reactions, topically applied aspirin did not decrease histamine-induced itch in the model used.

REFERENCE COUNT: 39 THERE ARE 39 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 5 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN

ACCESSION NUMBER: 2001:835299 CAPLUS

DOCUMENT NUMBER: 136:145110

TITLE: A randomized parallel trial of topical aspirin-moisturizer solution vs. oral aspirin for acute herpetic neuralgia

AUTHOR(S): Balakrishnan, Sadasivam; Bhushan, Kumar; Bhargava, Vinod Kumar; Pandhi, Promila

CORPORATE SOURCE: Departments of Pharmacology and Dermatology, Venereology, Postgraduate Institute of Medical Education and Research, Chandigarh, 160 012, India International Journal of Dermatology (2001), 40(8), 535-538

SOURCE: CODEN: IJDEBB; ISSN: 0011-9059

PUBLISHER: Blackwell Science Ltd.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Background In this study, the efficacy of oral aspirin vs. topical aspirin in moisturizer (Vaseline Intensive Care Lotion) was studied in an open, randomized, parallel trial in patients with acute herpetic neuralgia. Methods Thirty patients were evaluated in the trial, with 15 in each group. The patients were randomized to receive either oral aspirin, 375-750 mg three times a day, or 75 mg topical aspirin/mL of moisturizer (5-10 mL, depending on the extent of involvement), three times a day, for 21 days. Pain was assessed daily by means of a self-rating visual analog scale and physician assessment. In addition, the skin and plasma levels of aspirin were measured in both groups. Results The mean time to onset of pain relief was 44 min with topical aspirin and 110 min with oral aspirin. The mean duration of pain relief after a single application of topical aspirin was 5.4 h, whereas it was 3.5 h with oral aspirin. The mean visual analog scale scores for pain with oral aspirin decreased from  $68.2 \pm 6.1$  on day zero to  $43.1 \pm 8.7$  on day 21, which was not significant compared with the baseline score. With topical aspirin, the baseline pain score was  $77.5 \pm 3.7$  and decreased to  $6.8 \pm 3$  on day 21 ( $P < 0.001$  compared to the baseline score and compared to oral aspirin). The mean plasma and skin levels of aspirin

following oral administration were  $16.21 \pm 1.1 \mu\text{g/mL}$  and  $1.97 \pm 0.3 \mu\text{g/mm}^2$ , resp. After topical administration, the mean plasma level of aspirin was  $2.29 \pm 0.5 \mu\text{g/mL}$  ( $P < 0.01$  vs. oral aspirin) and the skin level was  $5.96 \pm 0.4 \mu\text{g/mm}^2$  ( $P < 0.05$  vs. oral aspirin). Treatment tolerance was excellent in both groups. Conclusions This trial has demonstrated that topical aspirin in moisturizer is clearly superior to oral aspirin in relieving the pain of acute herpetic neuralgia, and that the analgesic activity of aspirin is largely due to its local effect.

REFERENCE COUNT: 13 THERE ARE 13 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 6 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN

ACCESSION NUMBER: 2001:167792 CAPLUS

DOCUMENT NUMBER: 134:227363

TITLE: Topical use of kappa opioid agonists to treat otic pain

INVENTOR(S): Gamache, Daniel A.; Yanni, John M.

PATENT ASSIGNEE(S): Alcon Laboratories, Inc., USA

SOURCE: PCT Int. Appl., 24 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001015678	A2	20010308	WO 2000-US22766	20000818 <--
WO 2001015678	A3	20020103		

W: AU, BR, CA, CN, JP, MX, PL, TR, ZA

RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE

PRIORITY APPLN. INFO.: US 1999-387359 A 19990831

AB Topical or intranasal compns. and methods for treating otic pain caused by otitis, surgery, or swimmer's ear are disclosed. In particular, the invention discloses compns. and methods of using  $\kappa$ -opioid agonists locally for the prevention or alleviation of otic pain. Compns. also comprise antimicrobial, antiallergy, and anti-inflammatory agents to treat otic infections, allergies, and inflammations associated with otic pain. For example, an otic/nasal solution contained (by weight) a  $\kappa$ -opioid EMD-61753 0.01-1.0%, phosphate buffered saline 1.0%, Polysorbate 80 0.5%, and water up to 100%.

L6 ANSWER 7 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN

ACCESSION NUMBER: 2001:167791 CAPLUS

DOCUMENT NUMBER: 134:227362

TITLE: Use of 5-HT1B/1D agonists to treat otic pain

INVENTOR(S): Gamache, Daniel A.; Yanni, John M.; Sharif, Najam A.

PATENT ASSIGNEE(S): Alcon Laboratories, Inc., USA

SOURCE: PCT Int. Appl., 22 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE

WO 2001015677 A2 20010308 WO 2000-US22764 20000818 <--  
WO 2001015677 A3 20020328  
W: AU, BR, CA, CN, JP, MX, PL, TR, US, ZA  
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL,  
PT, SE

PRIORITY APPLN. INFO.: US 1999-387358 A 19990831  
AB Topical otic or intranasal compns. and methods for treating otic pain caused by otitis, surgery, or swimmer's ear are disclosed. In particular, the invention discloses compns. and methods of using 5-HT1B/1D agonists for the prevention or alleviation of otic pain. Compns. also comprise an antimicrobial, antiallergy, and anti-inflammatory agent to treat otic infections, allergies, and inflammations associated with otic pain. For example, an otic/nasal solution contained CGS-12066A 0.01-1.0%, phosphate buffered saline 1.0%, Polysorbate 80 0.5%, and water up to 100% (weight/volume), resp.

L6 ANSWER 8 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN  
ACCESSION NUMBER: 1998:327685 CAPLUS

DOCUMENT NUMBER: 129:156440

ORIGINAL REFERENCE NO.: 129:31709a,31712a

TITLE: Skin and plasma levels of acetylsalicylic acid: a comparison between topical aspirin/diethyl ether mixture and oral aspirin in acute herpes zoster and postherpetic neuralgia

AUTHOR(S): Bareggi, S. R.; Pirola, R.; De Benedittis, G.

CORPORATE SOURCE: Department of Pharmacology, University of Milan, Milan, 20129, Italy

SOURCE: European Journal of Clinical Pharmacology (1998), 54(3), 231-235

CODEN: EJCPAS; ISSN: 0031-6970

PUBLISHER: Springer-Verlag

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Objective: The aim of this investigation was to elucidate whether the analgesic effect was due to the local aspirin or to the systemic drug. This was done by comparing skin and plasma levels of acetylsalicylic acid (ASA) and salicylic acid (SA) after topically administered ASA/diethyl ether (ADE) mixture in acute herpetic neuralgia (AHN) and postherpetic neuralgia (PHN). The analgesia and the plasma and skin levels of ASA were also determined after oral administration of aspirin. Methods: Nineteen patients, 11 (57.9%) with AHN and 8 (42.1%) with PHN were given, on different days, a single 500-mg oral dose of ASA or a topical dose (750 mg) of (ADE) daubed onto the painful skin. The analgesic effect was assessed by a visual analog scale (VAS). Overall pain relief was graded as: excellent, good, fair, or poor. AHN as well as PHN patients had severe pain at baseline (6.83 and 5.93). Levels of ASA and SA in plasma and in the stratum corneum after adhesive tape stripping of the treated area were determined by HPLC. Results: After ADE application, the analgesic effect was very rapid and VAS scores were lower than at baseline. Pain significantly decreased by 82.6% after topical and 15.4% after oral ASA. After ADE, 95% of the patients had excellent or good pain relief, but after oral administration 79% of the patients had a poor response. Pain relief was similar in the two subgroups after ADE. Skin concns. of ASA, but not of SA, after ADE were about 80- to 100-fold those after oral administration. Levels of ASA and SA in plasma after oral administration were similar to those previously found, but after ADE were undetectable or very low. Patients with excellent pain relief showed a trend towards higher ASA

skin concns. Conclusions: The analgesic effect can be obtained only after topical administration, because by this route the skin levels of ASA are much higher than after oral administration. The mechanism is exclusively local; there are no active drugs in plasma after topical administration.

REFERENCE COUNT: 23 THERE ARE 23 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 9 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN

ACCESSION NUMBER: 1996:489273 CAPLUS

DOCUMENT NUMBER: 125:132614

ORIGINAL REFERENCE NO.: 125:24573a,24576a

TITLE: Topical aspirin/diethyl ether

mixture versus indomethacin and diclofenac/diethyl ether mixtures for acute herpetic neuralgia and postherpetic neuralgia: a double-blind crossover placebo-controlled study

AUTHOR(S): Benedittis, Giuseppe De; Lorenzetti, Ariberto

CORPORATE SOURCE: Institute Neurosurgery, University Milan, Milan, Italy

SOURCE: Pain (1996), 65(1), 45-51

CODEN: PAINDB; ISSN: 0304-3959

PUBLISHER: Elsevier

DOCUMENT TYPE: Journal

LANGUAGE: English

AB The efficacy of topical aspirin/diethyl ether (ADE) mixture in the treatment of acute herpetic neuralgia and postherpetic neuralgia, suggested in a previous open-label study (De Benedittis et al. 1992), has been evaluated in a double-blind crossover placebo-controlled study as compared with two other NSAID (indomethacin and diclofenac) drug/ether mixts. The study included 37 patients (15 with acute herpetic neuralgia (AHN) and 22 with postherpetic neuralgia (PHN)). Comparative treatment results showed that only aspirin (but not indomethacin and diclofenac) was significantly superior to placebo, as compared with baseline and duration of pain relief ( $P < 0.05$  and  $P < 0.01$ , resp.), in both AHN and PHN groups. Good-to-excellent results were achieved by 87% of AHN patients and by 82% of PHN patients treated with the ADE mixture, with no significant differences between the two groups. On the whole, patients with trigeminal involvement, less severe pain and with dysaesthetic quality of pain yielded best results.

L6 ANSWER 10 OF 10 CAPLUS COPYRIGHT 2008 ACS on STN

ACCESSION NUMBER: 1996:232762 CAPLUS

DOCUMENT NUMBER: 124:306865

ORIGINAL REFERENCE NO.: 124:56559a

TITLE: Dose-dependent competitive block by topical acetylsalicylic and salicylic acid of low pH-induced cutaneous pain

AUTHOR(S): Steen, Kay H.; Reeh, Peter W.; Kreysel, Hans W.

CORPORATE SOURCE: Universitaets-Hautklinik Poliklinik, Universitaet Bonn, Bonn, D-53105, Germany

SOURCE: Pain (1996), 64(1), 71-82

CODEN: PAINDB; ISSN: 0304-3959

PUBLISHER: Elsevier

DOCUMENT TYPE: Journal

LANGUAGE: English

AB In a human acid pain model, which used continuous intradermal infusion of a phosphate-buffered solution (pH 5.2) to induce localized nonadapting pain, the flow was adjusted to result in constant pain ratings of about 20% or 50% on a visual analog scale. Volunteers participated in 4 different placebo-controlled double-blind

cross-over studies to measure rapidly evolving cutaneous analgesia from topically applied new ointment formulations of acetylsalicylic acid (ASA) and salicylic acid (SA) as well as of com. ibuprofen and benzocaine creams. Similar, log-linear dose-response curves were found for both ASA and SA, significant in effect at  $\geq 3$  g/kg and reaching saturation level at 15 and 30 g/kg, resp., which, 20 min after application, caused a mean pain suppression of 95% by ASA and 80% by SA. Half-maximal effects were achieved at 3 g ASA/kg and 15 g SA/kg. The SA action was also clearly slower to develop. With an increased flow of the acidic buffer, producing lower effective tissue pH and more intense pain, the effect of ASA and SA decreased to 73% pain suppression. A competitive mechanism of both drug effects was suggested by the fact that, with 15 g ASA or SA/kg, pain reduction could be reversed by increasing the buffer flow by a factor of 1.75. Com. ibuprofen (50 g/kg) and benzocaine creams (100 g/kg) were comparably as effective as ASA and SA, but the local anesthetic caused a loss of all cutaneous sensations, while the touch threshold with the specific analgesics was the same as with the placebo ointment. Thus, topical applications of nonsteroidal anti-inflammatory drugs dissolved in different ointment formulations have proven dose-dependently effective and specific in suppressing exptl. acidotic pain by a local and competitive mechanism.

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